PTO/SB/01 (03-01)

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DEGLADATION FOR LITTLETV OR	Attorney Docket Number		
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor		
PATENT APPLICATION	COMPLETE IF KNOWN		
(37 CFR 1.63)	Application Number		
Declaration Submitted OR With Initial Filling  Declaration Submitted after Initial Filling (surcharge (37 CFR 1.16 (e)) required)	Filing Date		
	Group Art Unit		
	Examiner Name		

Filing	required)	Examiner Name	•					
As a below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Longitue	Longitudinal - Torsional Ultrasonic Tissue Dissection							
11	ssue Viss	e2770//			ļ			
the specification of which	(11tle of tr	e Invention)						
is attached hereto								
OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International								
was med on (what both the	`\ <u>\</u>		atoo i ppinationi					
Application Number	and was a	mended on (MM/DD/YY	YY)		(If applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop YES	y Attached?			
	-							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below						
Name David Wuchinich						
Address 431 Hawthor	ne Avei	nue				
city Yonkers		State NY	ZIP 10705			
Country U. S. A. Teld	ephone <i>914</i>	965 8825	Fax 707222 0142			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR :	A petition ha	s been filed for this un	signed inventor			
Given Name (first and middle [if any]) David G. Family Name or Surname Wuchinich						
Inventor's David Wuching Date 4/11/2001						
Residence: City Yonkers	State NY	Country U.S.A.	Citizenship U.S.A.			
Malling Address 431 Hawthorne Avenue						
chy Yonkers	State N 7   ZIP 10705		Country U. S. A.			
NAME OF SECOND INVENTOR:	A petition has	been filed for this unsi	gned inventor			
Given Name (first and middle [if any])  Family Name or Surname						
Inventor's Signature Date						
Residence: City	State	Country	Citizenship			
Malling Address						
City	State	ZIP	Country			
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						



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## **DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)**

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As the below named inventor(s), I/we declare that:					
This declaration is directed	ed to:				
X	The attached application, or				
	Application No	, filed on,			
ł	as amended on	(if applicable);			
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;					
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;					
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF INVENTOR(S)					
Signature: David Wuchinich  Signature: Durible Whime Citizen of: United States					
Signature:	Deluhins	Citizen of: United States			
Inventor two:					
Signature:		Citizen of:			
Inventor three:					
Signature:		Citizen of:			
Inventor four:					
Signature:		Citizen of:			
☐ Additional inventors are be	eing named ona	dditional form(s) attached hereto.			

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.